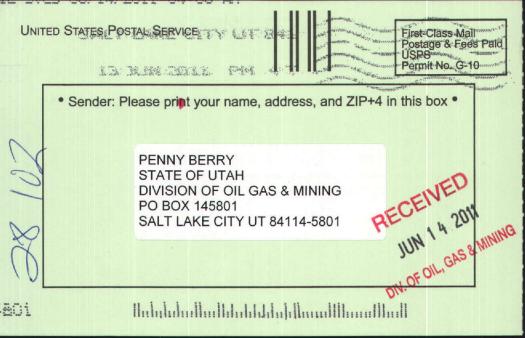
## SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse ☐ Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece. or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 1. Article Addressed to: □ No If YES, enter delivery address below: LAURA LEON WELLS FARGO BANK 307 TROLLEY SQUARE SALT LAKE CITY UT 84102 3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered □ Return Receipt for Merchandise ☐ Insured Mail C.O.D. 5/31/2011 M0490062 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 4801 6294 7005 2570 0000 (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



## U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com				
PB 05/3	12011	mou	19000	12
Postage	\$	- F	Reden	iption
Certified Fee		1	of CD#	1
Return Receipt Fee (Endorsement Required)			189 CH	mark €2
Restricted Delivery Fee (Endorsement Required)				
Total Posts				

LAURA LEON

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2570

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WELLS FARGO BANK

Street, Apt. 1 307 TROLLEY SQUARE or PO Box N SALT LAKE CITY UT 84102

City, State, 2